Date: 17 JULY ZOI7

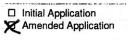


City of Tucson COMMITTEE STATEMENT **OF ORGANIZATION**

COMMITTEE ID NUMBER (office use only)

-270-CT

Committee Name (required):	Michael Oatman For Tucson Ward 6			
first or last name & office)	Outside Name (consistent) Michael Oatman			
Candidate Information:	Candidate's Name (required): Michael Oatman			
	Candidate's mailing address (required): PO Box 304, Tucson, Arizona.			
	Candidate's email address (required): wardsix@MichaelOatman.info	•:		
	Candidate's phone number (required): (520)302-5465	•		
	Candidate's website (if any): MichaelOatman.info	•		
Office Sought (choose one):	□ Mayor ☑ Council Member, Ward · 6			
lection Cycle for Office Soug	th (year the election will take place) (required):			
Party Affiliation: required)	□ Democrat □ Libertarian □ Republican ☒ Other: Green Party			
☐ Political Action Comn	nittee (PAC)			
Committee Name (required): if sponsored, must include sponsor's name)		/		
Political Function (optional):	□ Contributions □ Candidate-Related Independent Expenditures □ □			
select any that apply)	□ Ballot Measure Expenditures □ Recall Expenditures			
Sponsorship Information:	Sponsor's name or nickname (required):			
(if applicable)	Sponsor's mailing address (required):			
	Sponsor's email address (required):	- 4		
	Sponsor's phone number (if any):			
	Sponsor's website (if any):	- 63		
Special Status must be filed	1 with Secretary of State Separate Segregated Fund of a Corporation, LLC, Partnership, or U			
	d with Secretary of State ☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or U☐ Standing Committee (must also complete separate standing committee registr	ation		
if applicable)	☐ Standing Committee (must also complete separate standing committee registr	only		
(if applicable) □ Political Party Committee Name (required):	☐ Standing Committee (must also complete separate standing committee registr☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications	only		
if applicable) Political Party Committee Name (required): (must include party affiliation)	☐ Standing Committee (must also complete separate standing committee registr☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications	only		
if applicable) Political Party Committee Name (required): (must include party affiliation)	☐ Standing Committee (must also complete separate standing committee registr ☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications	only		
if applicable) Political Party Committee Name (required): (must include party affiliation)	☐ Standing Committee (must also complete separate standing committee registr ☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications) ☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)	only		
	☐ Standing Committee (must also complete separate standing committee registr ☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications) ☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804) ☐ County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)	only		



Date: 17 JULY 2017



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

COMMITTEE INFORMATION:

200		
Contact Information:	Committee's mailing address (required):	PO Box 304, Tucson, Arizona. 85702.
	Committee's email address (required):	wardsix@MichaelOatman.info
	Committee's phone number (if any):	(520) 302-5465
	Committee's website (if any):	MichaelOatman.info
Chairperson's Information:	Chairperson's name (required):	Mery Hembree
	Chairperson's physical address (required)	
	Chairperson's mailing address (if different	:PO Box 304, Tucson, Arizona. 85702.
	Chairperson's email address (required): _	chair@MichaelOatman.info
	Chairperson's phone number (required): _	(520) 302-5465
	Chairperson's employer (required):	Self
	Chairperson's occupation (required):	Student
Treasurer's Information:	Treasurer's name (required):	Michael Oatman
	Treasurer's physical address (required): _	2731 N Fair Oaks Ave, Tucson, Arizona.
	Treasurer's mailing address (if different):_	PO Box 304, Tucson, Arizona.
	Treasurer's email address (required):	treasurer@MichaelOatman.info
	Treasurer's phone number (required):	(520) 302-5465
	Treasurer's employer (required):	Internet Convenience Store, L.L.C.
	Treasurer's occupation (required):	Webmaster, Consultant
Bank or Financial Institution:	Bank name (required):	Pyramid Federal Credit Union
(do not list acct numbers)	Additional bank name (if applicable):	,
****	Additional bank name (if applicable):	
		The second section with the second se
chairperson or treasurer of the committee and authorize it to campaign finance and reporti	perjury that the foregoing information is true committee named herein, if applicable; (2 o receive/make contributions/expenditures or guide; (4) agree to comply with Arizona	ue and correct. I further declare that I: (1) consent to serve as 2) designate the above-named committee as my official candidate on my behalf, if applicable; (3) have read the Secretary of State's a election law, including campaign finance laws codified at A.R.S. service of process for campaign finance purposes via the email
Chairperson's signature:	May Habrer	Date: 17 July 2017
Treasurer's signature:	V CME CAMAN	Date: 17 July 2017
Candidate's signature (if appl	icable): See Above	Date:
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